

COORDINATED PUBLIC TRANSPORTATION AND HUMAN SERVICES TRANSPORTATION PLAN

Adopted
MARCH 16, 2009
By the Pitt County Board of Commissioners



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I. INTRODUCTION

A. Federal Regulatory Background

For more than twenty years, the federal and state governments have been working to better coordinate human service transportation activities. In 1985, during an oversight hearing on Rural Transportation, Congress heard testimony prompted by concerns of the lack of federal coordination between programs, such as the Department of Health and Human Services (HHS) and the Department of Transportation (DOT).

Aiming to better coordinate activities, the Secretaries of HHS and DOT signed an agreement in 1986 establishing the Joint DOT/HHS Coordinating Council on Human Service Transportation (CCHST). Since its creation, the CCHST has concentrated efforts to identify barriers to coordinated transportation. At one time, the agencies identified sixty-four factors that transportation and human service representatives believed were barriers to transportation coordination. Barriers included uncertainty regarding federal responsibilities for transportation, fragmented accounting and reporting procedures, uncertainty in using resources for recipients other than program constituents, and prohibition against charging fares under the Older Americans Act.

To further support coordination, Congress included several provisions in its 1998 passage of the Transportation Equity Act for the 21st Century (TEA -21), Public Law (PL) 105-178. Most notable was the provision to require Job Access and Reverse Commute (JARC) services, a predecessor program to today's JARC program, projects to be part of a coordinated public transit-human services transportation planning process.

President George W. Bush released an Executive Order on Human Service Transportation Coordination on February 24, 2004, to improve the human service transportation coordination of individuals with disabilities, older adults, and people with lower incomes. The Executive Order established the Interagency Transportation Coordinating Council on Access and Mobility (CCAM) represents 11 Federal departments. CCAM was created to:

- promote interagency cooperation
- establish appropriate mechanisms to minimize duplication and overlap of federal programs and services so that transportation-disadvantaged persons have access to more transportation services
- facilitate access to the most appropriate, cost-effective transportation services within existing resources
- encourage enhanced customer access to the variety of transportation and resources available
- formulate and implement administrative, policy, and procedural mechanisms that enhance transportation services at all levels:

There are currently 62 Federal programs run by these Federal departments that provide some kind of transportation service for seniors, people with disabilities, or individuals with lower incomes. These funds result in a myriad of services that are not coordinated or managed efficiently at the State or local level

In May 2005, the CCAM issued a report to the President with recommendations for breaking down federal barriers to transportation for all transportation-disadvantaged populations. The report detailed action plans for each of the eleven federal agencies who comprise the CCAM. As a result CCAM, United We Ride (UWR) was launched, a national initiative to implement the requirement of the Executive Order. The initiative has a website at www.unitedweride.gov.

While it has been a long process, the federal government is working to strengthen its coordination requirements for human service transportation activities. On August 10, 2005, the Safe, Accountable, Flexible, Efficient, Transportation Equity Act: A Legacy for Users (SAFETEA-LU) PL 109-059 was signed into law. SAFETEA-LU established a federal mandate for public transportation and human service coordination planning. Starting in Fiscal Year 2007, SAFETEA-LU requires that a human service transportation coordination plan be in place before transportation service providers may acquire funding from three Federal Transit Administration (FTA) programs, the Elderly Individuals and Individuals with Disabilities (Section 5310), Job Access and Reverse Commute (JARC, Section 5316), and the New Freedom (Section 5317) programs.

In 2006, the CCAM issued two policy statements that take important steps to bring federal programs together to help people with disabilities, older adults, and lower income families get the transportation they need for their day-to-day mobility. The CCAM policy statements focus on two key areas: (1) coordinated human service transportation planning and (2) vehicle sharing. These policies support communities and organizations receiving federal funding and assist them in planning transportation services together and sharing resources. The policies were included as part of the recommendations in a 2005 report to the White House concerning Human Service Transportation Coordination. Each department on the CCAM was charged with taking action to implement these policies.

SAFETEA-LU's requirement of a coordinated plan and United We Ride's goals and objectives work together to offer elderly citizens, persons with disabilities and low income populations greater access to transportation services, to reduce duplication of services and to gain greater efficiencies in the distribution of human transportation services. Encompassed in the coordinated plan is an assessment of available services, deficiencies in current services, an assessment of clearly defined needs and strategies to address deficiencies for target populations, and a prioritization list of strategies. All projects funded via these programs must meet the needs identified in the coordinated plan. Utilizing the Framework for Action, an assessment of Pitt County was conducted through a Public Transportation -Human Services Workshop. The Framework for Action is a self-assessment tool developed through the United We Ride initiative sponsored by the FTA. The Framework was used to identify areas needing new and improved services, highlighting the actions needed to improve the coordination of human service transportation in the area.

B. Federal Funding Programs

SAFETEA-LU requires that projects selected for funding under the Elderly Individuals and Individuals with Disabilities (5310), JARC (5316), and New Freedom (5317) programs be derived from a locally developed coordinated transportation plan and that the plan be developed through a process that includes representative from the public, private, and non-profit transportation and human service providers and the public. The NC Department of Transportation (NCDOT), Public Transportation Division was designated by the Governor in April 2008 to administer both the small urban and non-urbanized area apportionment of funds to North Carolina. The applications for the three competitive grants are reviewed by a project selection committee consisting of representatives from the Public Transportation Division. The selection committee utilizes pre-determine project evaluation criteria to score each application. Those with the highest score receive the available funding. Grants are awarded for a two year period.

A brief description of the programs and examples of eligible projects for each are:

1. Job Access Reverse Commute (JARC)

The JARC program has existed under previous transportation legislation - the Transportation Equity Act for the 21st Century (TEA-21). SAFETEA-LU has changed the funding from an earmark to a formula program based on the number of low-income individuals in the urbanized area. JARC was created to help address the transportation needs of unemployed and underemployed persons trying to access jobs. Public transit primarily serves people within a central urban area; however entry-level jobs often are created in the suburbs. Previously funded JARC projects that are able to document success will be eligible for funding.

New projects must relate to the development and maintenance of transportation services designed to transport welfare recipients and eligible low-income clients to and from jobs and activities related to their employment. Examples of eligible projects include:

- Public transit late-night and weekend service.
- Public transit guaranteed ride home program expanding fixed-route transit routes
- Vanpools or shuttle services to improve access to employment or training
- Car loan programs that assist individuals in purchasing and maintaining vehicles
- Promotion of public transit for non-traditional work schedules
- Voucher programs targeted to persons entering the workforce or on welfare

2. New Freedom

The New Freedom Program is a newly created program under SAFETEA-LU. The purpose of New Freedom is to expand transportation services beyond what is required for the Americans with Disabilities Act (ADA) for the elderly and persons with disabilities. New Freedom projects must be new transportation service, defined as not being provided as of August 10, 2005. Examples of eligible projects include:

- Expansion of paratransit service beyond the ¾ mile required by ADA
- Expansion of current hours of operation for paratransit services that are beyond those provided on fixed route services
- Same day ADA service
- Door-through-door service-provision of escorts
- Purchasing vehicles for new accessible taxi, ride sharing and/or vanpool programs
- New voucher programs offered by human service providers
- New volunteer driver and aide programs
- Operational planning for the purchase of intelligent transportation technologies

3. Elderly Persons and Persons with Disabilities (Section 5310)

This program existed under the previous transportation legislation. The 5310 program provides funds for capital costs associated with providing services to older adults and people with disabilities. Additional requirements under SAFETEA-LU include the provision that projects funded under this program must be included in a locally-developed human service transportation coordination plan. North Carolina is one of seven states that are authorized to use up to one-third of the annual statewide allocation for operating costs. Examples of eligible projects include:

- Purchase of service (POS): the acquisition of transportation service under a purchase of service contract with a public transportation provider
- Vehicles
- Mobility managers and related activities
- Radio and communication equipment
- Vehicle shelters
- Wheelchair lifts and restraints
- Computer hardware and software

II. Plan Approach

Projects funded through the 5310, 5316, and 5317 programs require the development of a local coordinated public transit-human services plan (CPT-HSTP), which incorporates private and non-profit transportation and human services providers and the general public.

Completing this extensive planning process required the participation of many organizations and agencies and the creation of a planning team. The planning team is comprised of representatives of the following organizations:

- Pitt County Department of Social Services
- Pitt County Council on Aging
- Eastern Carolina Vocational Center
- East Carolina Behavioral Health
- Vocational Rehabilitation Services
- Pitt County Health Department
- Pitt County Rural Planning Organization
- Greenville Area Transit (GREAT) – Urban Transit System
- Pitt County Board of Commissioners
- ADA Advocate and Consumer
- NCDOT/PTD
- Pitt County Government
- Pitt Area Transit System

Pitt Area Transit served as the lead agency to convene a Transportation Summit to receive input from local stakeholders representing transportation patrons, the elderly, low-income and disabled populations, and their advocates. Stakeholders were invited to participate in the Transportation Summit to identify needs and gaps in the current transportation service. Unmet needs were identified and prioritized during the summit. The results from this summit are the foundation for the CP-HST and will guide the application process and project selection. The organizations that participated in the summit represent a broad array of interests and included elected officials, city/town/county managers, transportation advisory boards, local urban, and out of county public transportation providers, health care professionals, ADA advocates, human service agencies, hospitals, adult day care, sheltered workshops, vocational rehabilitation services, and faith based communities. Representatives from the following organizations participated in the identification and/or prioritization of coordinated transportation needs:

- | | |
|--------------------------------------------------|--------------------------------------|
| • Faith based communities | • Brody School of Medicine |
| • Pitt County Memorial Hospital | • PICASO |
| • East Carolina School of Medicine | • Pitt County Commissioners |
| • Bernstein Health Center | • Greenville Area Transit |
| • Pitt County Commissioner | • Town of Bethel |
| • Vocational Rehabilitation | • Greenville Community Shelter |
| • Eastern Carolina Vocational Center | • City of Greenville |
| ▪ Pitt County Department of Social Services | • Metropolitan Planning Organization |
| • Pitt County Council on Aging | • Pitt County Planning |
| • Pitt County Health Department | • Community Action |
| • East Carolina Behavioral Health | |
| ▪ Eastern Carolina Center for Independent Living | |

III. Demographics

Pitt County has a land mass of approximately 656 square miles, and an estimated population of 146,403 according to the 2006 U.S. Census report. Greenville, the county seat and the largest city is centrally located in the county. The estimated population of Greenville is 72,227 and is considered a small urban area by FTA. The county includes nine other incorporated municipalities. The largest three have estimated populations of 5,000, while the remaining municipalities have populations of less than 2,000 with the smallest municipality has a population of just over 100. The population of citizens over the age of 65 is

10%, and 9% of the population is between the ages of 55-64. Of particular interest is the age group of 45-54 that comprises 22% of Pitt County's population. As this age group continues to age and live in Pitt County, reasonable steps to address the growing number of senior citizens residing in Pitt County and their need for transportation to enable them to maintain their independence needs to be made now rather than later. The population of Pitt County living at or below poverty level is also a growing concern with the current county level at 17.8% compared to the state level of 13.8%.

In Pitt County, 62% of residents are white, 34% are African-American, and 4% are Asian, American Indian or some other race. In North Carolina, 70% of the population is white, 21% African American, and 9% are Asian, American Indian, or some other race. According to the 2006 population estimates, 6,490 individuals (4.5%) indicated they are of Hispanic origin, most of which (approximately 55%) indicating the origin as Mexican. North Carolina's percent population reporting they are of Hispanic origin is 6.7%.

IV. Inventory of Public Transportation Service and Community Transportation Service

A. Fixed Route Service

Transportation in Pitt County consists of four transportation systems. With the City of Greenville, East Carolina University Student Transit Authority (ECUSTA) provides transit service to ECU students, faculty, and staff to, from and around the ECU campus, off-campus housing areas, and several shopping/service areas. It is a closed system and transports only students attending East Carolina University. It is funded completely by East Carolina University, and receives no funding from the state or federal government. Greenville Area Transit System (GREAT) operates buses on five routes and provides complementary Para-transit service within the city limits of Greenville. GREAT operates Monday through Friday between the hours of 6:20 a.m. to 7:00 p.m., and on Saturday between the hours of 9 a.m. to 6 p.m. It does not operate on certain City holidays. GREAT receives federal and state funds, as well as local funds. Pitt Memorial Hospital provides a fixed-route shuttle service from its parking lots to the main hospital buildings. This operation is funded by the hospital.

B. Community Service

Pitt Area Transit System (PATS) is the coordinated public transportation system for Pitt County. Established in 1984, Pitt Area Transit remained a 501(c) 3 corporation until July 2007 when it was reformed as a department within Pitt County Government. In FY08, Pitt Area Transit System provided a total of 50,181 passenger trips. PATS provides transportation for human service agencies, the elderly, people with disabilities, and the general public of Pitt County outside of the city limits of Greenville. Pitt Area Transit System handles the transportation needs of over 50% of the population of Pitt County. PATS offers subscription, para-transit service, and limited demand response service between 6:00 a.m. and 7:30 p.m. Monday through Saturday. There is no Sunday service available and PATS is also closed on holidays observed by Pitt County Government. PATS also provides complementary para-transit service for the GREAT Bus System within the Greenville City limits. Requests for all transportation must be made at least one business day in advance between the hours of 9:00 a.m. and 2:00 p.m.

Pitt Area Transit System has a fleet of 24 vehicles dating to 2003 and earlier. Currently the fleet consists of:

- Two 14 passenger standard vans
- Five 13 passenger conversion vans without lifts
- One 8 passenger conversion van with two wheelchair stations
- Five 9 passenger conversion vans with two wheelchair stations
- One 9 passenger conversion van with four wheelchair stations
- One 10 passenger conversion van with three wheelchair stations
- Five 11 passenger conversion vans with two wheelchair stations
- Three 12 passenger conversion vans with two wheelchair stations
- One 13 passenger conversion van with two wheelchair stations

C. Private Providers

The list of private providers located in Pitt County is as follows:

- A Plus Courier – ambulatory only
- Aladdin Taxi – ambulatory and disabled
- Door to Door – ambulatory and disabled
- Express Cab – ambulatory only
- Jacquelyn McNair – ambulatory only
- Just Transportation – ambulatory only
- Med 1 Medical Transport – ambulatory and disabled
- Mobile Transportation – ambulatory only
- R & J Transportation – ambulatory only'
- Reliable Transport – ambulatory only
- Starliner Cab, Farmville – ambulatory only'
- Suggs Transportation – ambulatory only
- Unlimited Transport – ambulatory only

D. Non-profit providers

Currently there are no non-profit transportation providers in Pitt County that provide public transportation.

V. Needs Assessment

A facilitated workshop method was used to identify perceived needs, gaps, and barriers in the existing systems. A stakeholder workshop was held at 9:00am on September 25, 2008 at the Cornerstone Baptist Church in Greenville, North Carolina. It involved participants working in teams to complete the Framework for Action survey to assess the status of transportation services within Pitt County. The teams identified and discussed service needs, gaps, and barriers and recorded them for discussions that would follow. Each group then presented the identified issues and an opportunity to review each group's list of service gaps was provided. Duplicate input was accepted, and encouraged. Participants who had difficulties using this method were paired with team members who could assist them. It is important to note that some of the perceived needs, gaps, or barriers that were identified were largely consistent across the county and across agencies. Some other issues identified may have workable solutions in place, and their identification may more correctly reflect a lack of knowledge about services available through public and community transportation systems.

A major focus of developing a coordinated transportation plan is public input, more specifically stakeholder involvement. The primary objective of this plan is to encourage public transportation coordination and, provide a network of diverse stakeholders with a common interest in human service transportation the opportunity to collaborate on how to best provide transportation services to the targeted populations identified in the three programs noted above.

Stakeholder outreach and participation is key to the development of the plan. Guidance issued by FTA and the NCDOT specifically requires participation and recommends that it is inclusive, representing a broad spectrum of groups and organizations involved in human service transportation. Participants in the plan development process are listed in the Plan Approach Section II.

The Coordinated Plan is focused on identifying the most significant unmet transportation needs or service gaps faced by transportation-disadvantaged individuals. These unmet needs were substantiated by facilitating the United We Ride: A Framework for Action initiative during the stakeholder meeting. See *Appendix A: Framework for Action*. Participants conducted an assessment of current public transportation providers, including private and nonprofit providers, and identified public transportation needs. Participants identified areas where service is needed to meet the needs of people with limited incomes, the elderly, and persons with disabilities.

The following is a summary of needs, gaps, and barriers identified through the stakeholder workshop breakout groups. Note that some comments are duplicative, but reflects input from each of the seven breakout groups.

- Creating a One Call Center
- Cost Barriers – funding for agencies or provider
- Communication – Utilize public access channel, power point updating schedules, program contacts
- Extend hours of service to 24/7/365 – will need more equipment and drivers
- Travel time – utilize more equipment and drivers to reduce for bus and van service
- Time barrier and flexibility of schedules – scheduled routes may not meet needs of passengers
- Communication - Internal and External county wide
- Operational hours matching major employers
- Projected transportation needs to meet projected growth
- Need for more bus shelters
- Need more equipment and personal for service area expansion and additional service hours
- Expanded service to Pitt Community College
- Lack of seamless transportation
- More available stops
- Expanded night/weekend service
- Knowledge of available services and understanding on how to use services
- Education of riders and system responsibilities
- Wait times before and after appointments – pick up times
- Vouchers to reduce cost of service for low-income community. Especially elderly & disabled citizens
- Public awareness – need to educate the community on available services and how to utilize transportation
- Agency Coordination
- All people who can influence ridership are uninformed or misinformed
- Lack of support from public officials
- Lack of Cross-County Transportation
- Housing and locations – need more vehicles and personnel for expansion to low income areas of the county to better serve needs
- Fear of people to ask for help or take advantage of service
- Physical barriers – passengers not able to get to bus stops or out of house
- Language barriers
- More services for elderly and disabled populations – extend hours of operations
- Environmental Barriers - No sidewalks or crosswalks at bus stops
- Lack of information from agencies and organizations on transportation for disabled, elderly and low income
- Non-Human Service Agency clients – cost of transportation – insufficient funding
- Universal Fare Cards – works for all systems
- Accessibility features – lower steps and handicap features
- Quality of service – more equipment, more vans, especially for elderly even if not in a wheelchair
- Transportation to institutes of higher learning that are consistent with class schedules
- Car seats – make available on designated vehicles
- No coordination with surrounding counties
- More employment transportation routes
- Door to Door service vs. Curb to Curb for disabled and elderly clients who need additional assistance
- Information available in various forms – signage/color-coding/LEP/Braille
- Driver training – sensitivity to passenger needs and safety
- Better Marketing of Pitt Area Transit System

- Universal information center to give out information on how to get from point A to point B – NOT A CALL CENTER
- Restricted transit systems – ECU, GREAT
- Increase staff so that flexibility and services can expand – have to have appts. In before a certain time to get on schedules.
- Weight restrictions – lifts don't lift over certain weight and wheelchairs too wide – loveseat size
- Accommodations for shoppers
- Attendants for persons with disabilities

VI. PRIORITIZATION OF NEEDS

A set of strategies and related project actions will help to address the unmet needs and fill the gaps in human service transportation. Each group narrowed its strategies and activities to develop their top 3 priorities. Needs were prioritized using a dot vote scheme in which each workshop attendee was given five dots with which to express what issues were most important to them. Attendees could allocate the dots as they chose but not more than one dot per strategy or activity. The recommended priority actions are shown at the end of this section. Project proposals for funding under any of the three FTA programs will need to address at least one of the strategies or activities listed below. In developing strategies and actions to address unmet needs, some projects will have a greater overall impact on unmet needs than others and are thus a greater priority for funding.

- One Call Center
- Quality of service – more equipment, more vans, especially for elderly even if they are not in a wheelchair
- Cost Barriers – funding for agencies or provider
- Environmental Barriers – Need more sidewalks at bus stops
- Wait times before and after pick ups
- Communication – Utilize public access channel, power point, updating schedules, programs, contacts
- Universal fare card/Electronic swipe card system
- Van/Car pool program for employment access
- Park & Ride Lots
- Expand service area for GREAT Bus System
- Universal Information Center to give out information on how to get from Point A to Point B – NOT A CALL CENTER
- Operating hours expanded to 24/7/365
- Better marketing of Pitt Area Transit System
- Communication – Internal and External County wide
- Door to Door service vs. Curb to Curb for disabled and elderly clients who need additional service
- Knowledge of available services and understanding on how to use services by agencies and riders
- Voucher/tickets for emergency trips – express service on non 911 calls
- Restricted transit systems – ECU, GREAT
- Educate communities about transit system
- Increase staff and equipment for more flexibility in scheduling appointments
- 15 minute intervals for bus and van service
- Reduce travel time on bus or van
- Time Barrier and flexibility of schedules – scheduled routes may not meet needs of passengers
- Driver training – sensitivity to passenger needs and safety
- Education of riders and system responsibilities

The listing in the section above is arranged by expressed priority within each category. Since only the issues identified at a specific workshop were available for voting at that workshop, not all identified issues were considered by all voters, and since each voter could only choose up to five issues as "most important," there were many ties within categories.

The following identifies the outcome of the service strategies and activities prioritization exercise as expressed by each of the seven breakout groups/teams as most important. Duplications in the list were combined to make priorities as all-encompassing as possible.

1st Priority

- More Employment Transportation routes
- Quality of service – more equipment, more vans, more personnel - especially accessible vans for elderly & disabled even if they are not in wheelchairs
- Comprehensive public awareness and education including, but not limited to Human Service Agencies, transportation providers, communities, local officials and system riders of their roles and responsibilities in the use of transit and the transit system's roles and responsibilities to the users and providers.
- Use of voucher tickets to reduce cost to low-income community-especially elderly & disabled citizens

2nd Priority

- Strategic marketing of Pitt Area Transit System
- Need more equipment and personnel for service area expansion and additional service hours especially for elderly and disabled populations
- Universal Information Center

3rd Priority

- 15 minute intervals for bus and van service
- Enhance coordination with surrounding counties
- Driver Training – sensitivity to passenger needs and safety

4th Priority

- Shorter wait times before and after appointments
- Operating hours expanded to 24/7/365
- One Call Center through partnership with Intermodal Center

5th Priority

- Expand service area for GREAT Bus system
- Park and Ride Lots
- Electronic swipe cards/Universal fare cards

Funding applications for the three programs covered by this plan must address the above service and activity priorities based upon eligible activities for each program.

VII. SUMMARY

Many of the invited stakeholders assisted in developing the coordinated plan for Pitt County. The plan follows the required steps:

- Assess available services (public, private and nonprofit).
- Identify transportation needs for individuals with disabilities, older adults and people with low incomes.
- Develop strategies and/or activities to address the identified gaps and achieve efficiencies, where possible, in service delivery.
- Identify priorities for implementing the strategy/activities based on resources, time, and feasibility for implementation.

Upon approval, the plan will serve as document that will support future requests for funding targeted at the low income, elderly persons and disabled individuals who reside in Pitt County.

As the designated lead transportation provider in Pitt County per the county's Board of Commissioners, Pitt Area Transit is familiar with the federal and state rules, laws and regulations pertaining to USDOT's funding programs. In an effort to prevent duplication of service to ensure compliance with the complex program requirements, Pitt Area Transit can provide service under contract to entities that might be selected for funding under the three programs.

Fund metrics will be developed for each of the programs upon award of a grant. Quarterly and annual performance and financial reporting is required. Furthermore, the programs must be implemented consistent with federal and state policies, rules and regulations and with the NCDOT State Management Plan for the Sections 5310, 5311, 5316 and 5317 Programs.



August 2008

Dear Colleagues, Community Partners and Friends:

In July 2007, Pitt Area Transit System became part of Pitt County Government. It has been a busy and exciting year with many changes taking place to enhance transportation services to the citizens of Pitt County. In an effort to continue building a strong transit system in Pitt County, Pitt Area Transit is hosting a:

Transportation Summit – Identifying Barriers to Transportation

September 25, 2008.

8:30 AM – 4:00 PM

**Cornerstone Baptist Church
1095 Allen Road, Greenville, NC 27834**

The Summit will focus on identifying mobility barriers for Pitt County citizens and residents and allow participants to share specific transportation needs.

Please join us September 25, 2008 as together we work to meet the growing transportation needs of the citizens of Pitt County.

LUNCH WILL BE PROVIDED: In order to get an accurate head count for the caterer, please **RSVP by September 10. You may call 902-2003 or email rwclayton@pittcountync.gov.**